

	<p style="text-align: center;">Ognomy 640 Ellicott Street Buffalo, NY 14203 Tel: 877-664-6669 Fax: 716-325-9094</p>	<h1 style="text-align: center;">Fax</h1>
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To: undefined

From: mmrrAdmin

Fax: 1-929-207-0142

Date: Sep 06, 2023 12:56 PM

Subject: Fax From Ognomy

HST Order

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Order Form

Ordered By: Phy3

Patient Information:

Name: mm rr

Pt ID: 000001830

Pt DOB: 12/12/1999

Phone: (340) 785-0923

Sex: Male

Practitioner: Phy3

NPI:

Address 1234 number st, abc, AL, 12345

Insurance Information:

Insurance: -

ID #: -

Send a copy of the results to:

Name: Phy3

Order:

Order Name: HST Order

Vendor: Ognomy

Priority: 3

Test Type: Adult

HST Type: 1 Day

Timing: Routine

Diagnosis: Obstructive Sleep Apnea Syndrome

Diagnosis Code: G47.33

Electronically Signed By:

Phy3

Date: 09/01/2023 07:57:05 am



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